

# Mountain Pleasure Horse Association

## Versatility Program Enrollment Form

Due by May 1<sup>st</sup> each year

Enrollment Calendar Year: \_\_\_\_\_ Division (Circle One): Adult Youth

Participant Name: \_\_\_\_\_ MPHA Membership #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Horse Information

*Please use horse name as it appears on registration papers. You may enroll as many horses as needed, for \$5.00 per horse.*

Name of Horse: \_\_\_\_\_ MPHA Registration #: \_\_\_\_\_

Name of Horse: \_\_\_\_\_ MPHA Registration #: \_\_\_\_\_

Name of Horse: \_\_\_\_\_ MPHA Registration #: \_\_\_\_\_

Name of Horse: \_\_\_\_\_ MPHA Registration #: \_\_\_\_\_

**Total Horses Enrolled:** \_\_\_\_\_ **Fees Included (\$5 per horse):** \_\_\_\_\_

Signature of Participant: \_\_\_\_\_

By signing above, I am confirming that the horse(s) listed on this form is/are registered according to the Mountain Pleasure Horse Association's standards, and that I am a current member with the Mountain Pleasure Horse Association. I also agree to abide by the MPHA Versatility Program Rules, available on the MPHA website.

Submit completed forms to:

MPHA  
P.O. Box 33  
Wellington, KY 40387

Or e-mail form to: Taylor Chism at [davidsontaylor15@gmail.com](mailto:davidsontaylor15@gmail.com) and pay on the MPHA website under Services/Prices/PayPal Payments.